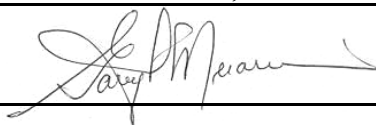

	OPERATING PROCEDURE	
	<i>HEAT RELATED EMERGENCIES</i>	
	Effective Date: November 1, 1986	Revised: October 1, 2000
	Approved By: 	
Approved By Operational Medical Director: 		

BLS

1. Perform initial patient assessment including temperature (tympanic, oral or rectal). Obtain pertinent medical history
2. Establish and maintain patent airway, administer OXYGEN, and provide ventilatory assistance as required
3. Relocate patient to a cool environment out of direct sunlight
4. Treat specific injuries as identified below:
 - ✓ Heat Cramps (Muscle cramping or spasms):
 - ☐ Remove or loosen clothing
 - ☐ Have patient rest
 - ☐ Replace fluids by mouth (water or 1/2 strength commercial electrolyte solution); give nothing by mouth if nauseated
 - ✓ Heat Exhaustion:
 - ☐ Remove or loosen clothing
 - ☐ Have patient lie down
 - ☐ If symptomatic, treat for shock
 - ☐ Replace fluids by mouth (water or 1/2 strength commercial electrolyte solution); give nothing by mouth if nauseated or if patient is not fully alert
 - ✓ Heat Stroke:
 - ☐ Remove clothing, treat for shock
 - ☐ Treat patient for shock
 - ☐ Cover patient with wet towels or sheets, and direct fans or air conditioning towards patient. Do not induce shivering

HEAT RELATED EMERGENCIES (6.3.00)

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ALS ONLY

5. Connect patient to cardiac monitor, document rhythm strip, and treat life-threatening dysrhythmias as outlined in appropriate protocol
6. Establish 1 or 2 large bore IV lines of 0.9% Sodium Chloride. Initiate fluid resuscitation as necessary to maintain an acceptable blood pressure. If patient has an acceptable blood pressure, then infuse Sodium Chloride as follows:
 - ❑ If the adult patient is normotensive, infuse a 500 ml bolus
 - ❑ If the adult patient is hypertensive infuse Sodium Chloride at KVO rate
 - ❑ Infuse Sodium Chloride in the pediatric patient as outlined in OP 6.2.01
7. If patient is hypoglycemic and symptomatic administer DEXTROSE:
 - ❑ Adult: D₅₀ 25 grams/50 cc (1 amp) IV Push. May be repeated once as needed.
 - ❑ Pediatric: D₂₅ or D_{12.5} at dosage recommended by the Broselow Resuscitation Tape, not to exceed 2 doses
8. Refer to seizure protocol as needed for associated seizure activity.

MEDICAL CONTROL ONLY

9. Other interventions or medications as directed by OLMC